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|---|---|-------------------------------------|---|--|
| <b>SERIAL NUMBER</b><br>10/798,130  | <b>FILING OR 371(c) DATE</b><br>03/11/2004<br><b>RULE</b>   | <b>CLASS</b><br>362                 | <b>GROUP ART UNIT</b><br>2875   | <b>ATTORNEY DOCKET NO.</b><br>70040111-1 |
| <b>APPLICANTS</b><br>Yin Leong Kwong, Penand, MALAYSIA;<br>Choon Guan Ko, Penang, MALAYSIA;<br>Chun Hean Cheah, Penang, MALAYSIA;   |   |                                     |   |  |
| <b>** CONTINUING DATA *****</b> <i>None, AE</i>   |   |                                     |   |  |
| <b>** FOREIGN APPLICATIONS *****</b> <i>None, AE</i>  |   |                                     |   |  |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 05/27/2004</b>  |   |                                     |   |  |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>MALAYSIA | <b>SHEETS DRAWING</b><br>3  | <b>TOTAL CLAIMS</b><br>20                |
| <b>INDEPENDENT CLAIMS</b><br>3  |   |                                     |   |  |
| <b>ADDRESS</b><br>AGILENT TECHNOLOGIES, INC.<br>Intellectual Property Administration<br>Legal Department, DL 429<br>P.O. Box 7599<br>Loveland, CO80537-0599   |   |                                     |   |  |
| <b>TITLE</b><br>Sampling for color control feedback using an optical cable  |   |                                     |   |  |
| <b>FILING FEE RECEIVED</b><br>1970  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                     | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |